

2010 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000087727

FILED
Sep 28, 2010
Secretary of State

Entity Name: FIRST CHOICE CHIROPRACTIC, LLC

Current Principal Place of Business:

200 BUTLER STREET
SUITE 301
WEST PALM BEACH, FL 33407

New Principal Place of Business:

1920 PALM BEACH LAKES BLVD
SUITE 217
WEST PALM BEACH, FL 33407

Current Mailing Address:

200 BUTLER STREET
SUITE 301
WEST PALM BEACH, FL 33407

New Mailing Address:

1920 PALM BEACH LAKES BLVD
SUITE 217
WEST PALM BEACH, FL 33407

FEI Number: 20-3426535

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLERGE, CARLINE DR.
200 BUTLER STREET
STE 301
WEST PALM BEACH, FL 33407 US

Name and Address of New Registered Agent:

CLERGE, CARLINE DR.
1920 PALM BEACH LAKES BLVD
STE 217
WEST PALM BEACH, FL 33407 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CARLINE CLERGE

09/28/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CLERGE, CARLINE
Address: 1920 PALM BEACH LAKES BLVD STE 217
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CARLINE CLERGE

MGR

09/28/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date